BEST AVAILABLE COPY

								Application or Docket Number					
	PATENT	APPLICATIO	RD		~ 4 (ر ا	7.~						
		Effec		09728717									
CLAIMS AS FILED - PART I								LE	ATITY		OTHER		
(Column 1) (Column 2)							TYPE			OR	SWALL	ENTITY	
 			/8				RA	E	FEE		RATE	FEE	
FC	OR —————		NUMBER FILED		NUMBER EXTRA		BASIC	FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			/ minus 20=		* .		X\$ 9=			OR	X\$18=		
INE	DEPENDENT C	LAIMS	3 minus 3 =				X40=			OR	X80=		
ML	JLTIPLE DEPEN	NDENT CLAIM P	RESENT				+135=			1	+270=		
* If the difference in column 1 is less than zero, enter "0" in column						column 2	L			OR			
								AL		OR	TOTAL		
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMA		ENTITY	OR	OTHER SMALL		
AMENDMENT A		CLAIMS REMAINING		HIGH	EST				ADDI-			ADDI-	
		AFTER AMENDMENT		PREVIO	DUSLY	PRESENT EXTRA	RAT	Έ	TIONAL FEE		RATE	TIONAL FEE	
	Total	#	Minus	**		=	X\$ 9)=		OR	X\$18=	1.55	
ME	Independent	*	Minus	***		=	X40	_			X80=		
•	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR			
							+135			OR	+270=		
·							TO ADDIT.	TAL FEE		OR	TOTAL ADDIT. FEE		
	<u> </u>	(Column 1)											
AMENDMENT B		CLAIMS REMAINING	Í	HIGH NUMI	BER	PRESENT	DAT		ADDI-			ADDI-	
		AFTER AMENDMENT		PREVIC PAID I		EXTRA	RAT	ᆸ	TIONAL FEE		RATE	TIONAL	
	Total	*	Minus	άt		=	X\$ 9)=		OR	X\$18=		
AME	Independent	*	Minus	***		=	X40=			OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									UH			
•								i= 		OR	+270=		
-								TAL		OR	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)													
AMENDMENT C		CLAIMS REMAINING		HIGHI NUME	BER .	PRESENT		\neg	ADDI-			ADDI-	
	_	AFTER AMENDMENT		PREVIO PAID F		EXTRA	RAT	E	TIONAL FEE		RATE	TIONAL FEE	
	Total	#	Minus	**		=	X\$ 9	_		OR	X\$18=	<u> </u>	
	Independent	*	Minus	***		=	X40:			On			
≪	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	X80=		
										OR	+270=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR	TOTAL ADDIT. FEE	() () ()	
***I	t the "Highest Nur The "Highest Num	mber Previously Pa ber Previously Paid	iid For" IN THIS d For" (Total or	3 SPACE is Independe	less thai nt) is the	n 3, enter "3." highest number	•	100	ropriate box	•			